Place Site Visit Label Here

Site Visit Form

(One Station per page)

Project ID:	
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Date:	Time:	Personnel	.		
Waterbody:			Location:		
Station ID:	Vis	it #: HUC	:	County:	
Latitude:					
Elevation:	ft m	Geo Method: GPS O	ther:	Datum: NAD27 NAD83 WGS84	
Samples Collected:	Sample	ID:	Sample Collecti	ion Information/Preservation:	
Water			GRAB EWI		
Analysis:			0.45µ Filtered	HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen	
Analysis:			0.45μ Filtered	HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen	
Analysis:			0.45µ Filtered	HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen	
Analysis:			0.45µ Filtered	HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen	
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Analysis:			0.45µ Filtered	HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen	
Analysis:				HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen	
Analysis:			0.45μ Filtered	HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen	
Sediment			SED-1		
Analysis:			Preserved: Non	e Other:	
Benthic Chl-a		Sample Method: C=Core H=Hoop T=Template N=None			
		ual Est. <50 mg/m2	=	n: R=Right C=Center L=Left	
Transect: A - B	- C -	D E		- H - I - J - K -	
Phytoplankton Chl-a			D1 Filtered:		
Phytoplankton CNP			D1 Filtered:	mL D2 Filtered: mL	
Algae				PERI-1 OTHER:	
Macroinvertebrates			MAC-R-500 (OTHER: # of Jars:	
Field Measurements:	Time:	*	Field Assessmen	nts:	
Water Temp:	C °F Air T	_	Field Forms: Aq	uatic Plant Visual Assessment Photos	
	nm/Hg SC:	uS/cm		Tracking Form Rosgen Form	
pH: DO: mg/L Turbidity: NTU			NRCS Form EMAP Forms Summary Form Change I Cross Section Text Discharge		
Turbidity: Clear Slight Turbid Opaque Channel Cross-Section Total Discharge					
Flow: cfs (Dry Bed Stranded Pools Data Loggers: Temperature YSI TruTrack Tr					
Meter Doppler Float Gage Visual Est. AquaRods Weather Station MiniDOT					
Comments: Only Transect F Total Site Length m Average Wetted Width m Transect Length m					
Chemistry Lab Information:					
Lab Samples Submitted to: Account #: Term Contract Number:					
Invoice Contact:			-		
Contact Name & Phone:				EDD Format: MT-eWQX Compatible	
1) Relinquished By & Dat	te/Time:	1) Shipped By:		1) Received By & Date/Time:	
		Hand FedEx/U	PS USPS	1	
2) Relinquished By & Dat	te/Time:	2) Shipped By:		2) Received By & Date/Time:	
, <u>1</u> = j 2 .		Hand FedEx/U	PS USPS	•	
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Site Visit Form Instructions

- 1. Place a Site Visit Code label in the upper left corner (ONLY 1 SITE VISIT CODE PER FORM).
- 2. Place a Trip Label in the upper right corner. (Covering Project ID with label is alright.)
- 3. **Project ID**: If you do not have a Trip Label, enter the Project ID assigned by Data Management. If Project ID is not assigned, leave blank for Water Quality Database Manager.
- 4. **Date/Time**: Enter the date and time of the station visit.
- 5. **Personnel**: Enter the first and last name(s) of the personnel conducting field activities.
- 6. Waterbody: Enter the name of the waterbody such as "Missouri River".
- 7. **Location**: Description of sample location such as "upstream from bridge on Forest Service road 100". For confidentiality please <u>DO NOT</u> use proper names of people in the location field.
- 8. **Station ID**: If you have a Trip Label, enter the established ID. If there is no ID on the Trip Label, leave the field blank and Data Management will generate a Station ID when the SVF is submitted.
- 9. Visit #: Enter "1" if this is a new station. Leave blank if visit number is unknown.
- 10. **HUC**: If you do not have a Trip Label, enter the fourth code (8 digit) HUC the station falls within.
- 11. **County**: If you do not have a Trip Label, enter the county in which the station falls within.
- 12. **Lat/Long**: Latitude and Longitudes should be obtained in decimal degrees using a GPS unit reading **NAD83** whenever possible. If a lat/long is obtained by another method, the datum and method must be recorded in the Site Visit Comments.
- 13. **Lat/Long Verified**: Latitudes and Longitudes should be verified <u>immediately</u> upon return from the field. Verify by plotting on a paper map or using a mapping website. Once the lat/long has been verified check the Verified box and enter initials after "By".
 - Do not make minor adjustments to measured values during verification; they are assumed to be correct within the limitations of the measurement system.
 - Gross errors should be corrected as follows: 1) Draw a single line through the erroneous value(s) and initial. Do not erase the original reading. 2) Write the corrected value in the comment field along with the method and datum used to derive the corrected value.
- 14. **Elevation:** Record elevation collected by GPS and circle the GPS datum used. If elevation is obtained by another method, the datum and method must be recorded in the Site Visit Comments.
- 15. Samples Collected: Check the box next to each activity that is collected during the station visit.
- 16. Sample ID: Write the Sample ID (Site Visit Code-sample identifier) for all of the samples collected.
- 17. Sample Collection Procedure: Circle the appropriate Sample Collection Procedure ID.
 - For each Chlorophyll a transect, record the sample collection method in the first space provided and the sample location in the second space provided (example: A: T R).
 - For Phytoplankton, record the volume filtered for each sample collected.
- 18. **Analysis Requested**: Record the requested laboratory analysis for each chemistry sample and circle the preservative used.
- 19. **Field Measurements**: Record your field measurements in the spaces provided.
- 20. Field Assessments: Check the boxes next to each type of field assessment completed.
- 21. **Site Visit Comments**: Record general comments about the station visit, samples, and field measurements.
- 22. Chemistry Lab Information: If chemistry lab samples were taken, complete this section.
 - Lab Samples Submitted to: Enter name of laboratory where samples will be sent.
 - Account #: Enter account number at laboratory where samples will be sent.
 - Date Submitted: Record date the samples were received by the laboratory.
 - Sign and date the form each time the samples change possession.